DECLARAT	Attorney Docket		80113-0371 (BCS03171)				
UTILITY OR	First Named Inv		Christopher J. Stone				
PATENT APP	NT APPLICATION COMPLETE IF KNOWN						
		Application No.		ssigned			
□ Declaration	☐ Declaration	Filing Date		ssigned			
submitted with	submitted after	Group Art Unit		ssigned			
initial filing	initial filing	Examiner Name	Una:	ssigned			
As a below named inventor, I hereby declare that:							
My residence, post office address, and citizenship are as stated below next to my name.							
I believe I am the original, first and sole inventor (only if one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
"METHOD AND SYS	STEM FOR PASSING	G CLOSED CAPTIO	N DATA OV	/ER A DIGITAL VISUAL			
Interface or High Definition Multimedia Interface"							
the specification of which	ch						
⊠ is attac	ched hereto						
or							
☐ was file	ed on	, as Ur	nited States	Application Number			
				and was amended			
	(if a						
			of the object				
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information, which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56.							
I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YY)	Priority Not Claim				
		·					
			<u> </u>				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:							
hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.							
Application Number	(s) Filing Dat	te (MM/DD/YY)	numbe supple	enal provisional application ers are listed on a emental priority data sheet BB/02B attached hereto.			

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DECLARATION - Utility Or Design Patent Application									
I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the matter provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.									
U.S Parent Applica	tion	PCT Parent Parent Filing Date Parent Patent Numb					umber		
Number			Number	(MM/DD/YYYY)		(if applicable)			
· · · · · · · · · · · · · · · · · · ·									
Additional U.S. or Po	Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B						2B		
	or, I her	reby app	oint the following	registered practitio	ner(s) to	o pro	secute	this	
				nt and Trademark O					1 :
All practitioners	associa	ciated with Customer Number: 20,480							
and				L		υ, τ	00		
□ Registered prace	titioner	(s) name	e/registration nun	nber listed below					
Name		R	egistration No.	Name		T	Regis	stratio	on No.
John V. Silve	rio		34,014				- region and rec		
Caroline T. Co			50,516						
Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.									
	nonden	nce to Ci	ustomer Number	or Bar Code Label:		20	400	- 	
or	pondon	100 10 0		or bar dodo Labor.		ZU,	480		
Correspondence	e Addre	ess Belo	w						
Attorney								·-··	
Firm Name									
Address									
City, State, Zip			1				1	_	
Country			Telephone		Fax		<u> </u>		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
Name of First Inventor A petition has been filed for this unsigned inventor									
Full Name of Inve	ntor	Christop	Ner J. Stone		Citi	izens	ship	USA	
Inventor's Signatu	ure (DA		Dat	te	9/3	50	03
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Post Office Addre	ss S	Same as Residence							
Name of Second Inventor A petition has been filed for this unsigned inventor									
Full Name of Inve	ntor /	Albert F	. Elcock		Citi	izens	ship	USA	
Inventor's Signatu	ure	Üll	but F Ale	ock	Dat	te	9-3	24-	2003
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Post Office Addre	ss :	Same as Residence							

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Name of Third Inventor	or A petition has been filed for this unsigned inventor						
Full Name of Inventor	Joseph F. Halgas Jr.	Citizens	hip USA				
Inventor's Signature	Jones & Algorit	Date	9/30/03				
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Post Office Address	Same as Residence						
Name of Fourth Inventor A petition has been filed for this unsigned inventor							
Full Name of Inventor	John P. Kamieniecki	Citizens	hip USA				
Inventor's Signature	Jehn Hammili	Date	9/30/03				
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